

|   |   |   |   |
|---|---|---|---|
| FORM PTO 1390<br>(REV 10-2003)  |   | U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE | ATTORNEY'S DOCKET NUMBER<br>05587-00369-US                          |
| TRANSMITTAL LETTER TO THE UNITED STATES<br>DESIGNATED/ELECTED OFFICE (DO/EO/US)<br>CONCERNING A FILING UNDER 35 U.S.C. 371  |   |   | U.S. APPLICATION NO. (If known, see 37 CFR 1.6)<br><b>10/506541</b> |
| INTERNATIONAL APPLICATION NO.<br>PCT/EP03/02175   | INTERNATIONAL FILING DATE<br>4 March 2003 | PRIORITY DATE CLAIMED<br>5 March 2002                   |   |
| TITLE OF INVENTION THERMOPLASTIC MOLDING MATERIAL AND MOULDED BODIES PRODUCED THEREFROM   |   |   |   |
| APPLICANT(S) FOR DO/EO/US Nicolai Papke   |   |   |   |
| Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:   |   |   |   |
| <p>1. <input checked="" type="checkbox"/> This is a <b>FIRST</b> submission of items concerning a filing under 35 U.S.C. 371.</p> <p>2. <input type="checkbox"/> This is a <b>SECOND</b> or <b>SUBSEQUENT</b> submission of items concerning a filing 35 U.S.C. 371.</p> <p>3. <input type="checkbox"/> This is an express request to begin national examination procedures (35 U.S.C. 371 (f)). The submission must include items (5), (6), (9) and (21) indicated below.</p> <p>4. <input checked="" type="checkbox"/> The US has been elected (Article 31).</p> <p>5. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371 (c)(2))</p> <p>a. <input checked="" type="checkbox"/> is attached hereto (required only if not communicated by the International Bureau).</p> <p>b. <input type="checkbox"/> has been communicated by the International Bureau.</p> <p>c. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US).</p> <p>6. <input checked="" type="checkbox"/> An English language translation of the International Application as filed (35 U.S.C. 371 (c)(2)).</p> <p>a. <input checked="" type="checkbox"/> is attached hereto.</p> <p>b. <input type="checkbox"/> has been previously submitted under 35 U.S.C. 154(d)(4).</p> <p>7. <input type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371 (c)(3))</p> <p>a. <input type="checkbox"/> are attached hereto (required only if not communicated by the International Bureau).</p> <p>b. <input type="checkbox"/> have been communicated by the International Bureau.</p> <p>c. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired.</p> <p>d. <input type="checkbox"/> have not been made and will not be made.</p> <p>8. <input type="checkbox"/> An English language translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371 (c)(3)).</p> <p>9. <input type="checkbox"/> An oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)).</p> <p>10. <input type="checkbox"/> An English language translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371 (c)(5)).</p> <p><b>Items 11 to 20 below concern document(s) or information included:</b></p> <p>11. <input checked="" type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.</p> <p>12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.</p> <p>13. <input checked="" type="checkbox"/> A preliminary amendment.</p> <p>14. <input checked="" type="checkbox"/> An Application Data Sheet under 37 CFR 1.76.</p> <p>15. <input type="checkbox"/> A substitute specification.</p> <p>16. <input type="checkbox"/> A power of attorney and/or change of address letter.</p> <p>17. <input type="checkbox"/> A computer-readable form of the sequence listing in accordance with PCT Rule 13ter.2 and 37 CFR 1.821 - 1.825.</p> <p>18. <input type="checkbox"/> A second copy of the published international application under 35 U.S.C. 154(d)(4).</p> <p>19. <input type="checkbox"/> A second copy of the English language translation of the international application under 35 U.S.C. 154(d)(4).</p> <p>20. <input type="checkbox"/> Other items or information:</p> |   |   |   |

|   |   |  |
|---|---|--|
| U.S. APPLICATION NO. (if known) <b>10/506541</b><br>37 CFR 1.52 | INTERNATIONAL APPLICATION NO.<br>PCT/EP03/02175 | ATTORNEY'S DOCKET NUMBER<br>05587-00369-US |
|---|---|--|

| 21. <input checked="" type="checkbox"/> The following fees are submitted:<br><b>BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) – (5)):</b><br><input type="checkbox"/> Neither international preliminary examination fee (37 CFR 1.482) nor international search fee (37 CFR 1.445(a)(2)) paid to USPTO and International Search Report not prepared by the EPO or JPO ..... \$1080.00<br><input checked="" type="checkbox"/> International preliminary examination fee (37 CFR 1.482) not paid to USPTO but International Search Report prepared by the EPO or JPO ..... \$920.00<br><input type="checkbox"/> International preliminary examination fee (37 CFR 1.482) not paid to USPTO but international search fee (37 CFR 1.445(a)(2)) paid to USPTO ..... \$770.00<br><input type="checkbox"/> International preliminary examination fee (37 CFR 1.482) paid to USPTO but all claims did not satisfy provisions of PCT Article 33(1)-(4) ..... \$730.00<br><input type="checkbox"/> International preliminary examination fee (37 CFR 1.482) paid to USPTO and all claims satisfied provisions of PCT Article 33(1)-(4) ..... \$100.00<br><br><b>ENTER APPROPRIATE BASIC FEE AMOUNT =</b><br>Surcharge of <b>\$130.00</b> for furnishing the oath or declaration later than 30 months from the earliest claimed priority date (37 CFR 1.492 (e)). | <b>CALCULATIONS</b> PTO USE ONLY<br><br><table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"></td> <td style="width: 50%; text-align: right;">\$ 920.00</td> </tr> <tr> <td></td> <td style="text-align: right;">\$</td> </tr> </table><br><table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 30%;">CLAIMS</th> <th style="width: 20%;">NUMBER FILED</th> <th style="width: 20%;">NUMBER EXTRA</th> <th style="width: 10%;">RATE</th> <th style="width: 10%;"></th> <th style="width: 10%;"></th> </tr> </thead> <tbody> <tr> <td>Total claims</td> <td>20-20 =</td> <td></td> <td>x</td> <td>\$</td> <td>0.00</td> </tr> <tr> <td>Independent claims</td> <td>1-3 =</td> <td></td> <td>x</td> <td>\$</td> <td>0.00</td> </tr> <tr> <td colspan="4">MULTIPLE DEPENDENT CLAIM(s) (if applicable)</td> <td>+</td> <td>\$</td> </tr> <tr> <td colspan="4"><b>TOTAL OF ABOVE CALCULATIONS =</b></td> <td>\$</td> <td>920.00</td> </tr> <tr> <td colspan="4"><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½.</td> <td>\$</td> <td></td> </tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL =</b></td> <td>\$</td> <td>920.00</td> </tr> <tr> <td colspan="4">Processing fee of <b>\$130.00</b> for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492 (f)).</td> <td>\$</td> <td></td> </tr> <tr> <td colspan="4"><b>TOTAL NATIONAL FEE =</b></td> <td>\$</td> <td>920.00</td> </tr> <tr> <td colspan="4">Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). <b>\$40.00</b> per property</td> <td>+</td> <td>\$</td> </tr> <tr> <td colspan="4"><b>TOTAL FEES ENCLOSED =</b></td> <td>\$</td> <td>920.00</td> </tr> <tr> <td colspan="4" rowspan="2"></td> <td style="text-align: right;"><b>Amount to be refunded:</b></td> <td style="text-align: right;">\$</td> </tr> <tr> <td style="text-align: right;"><b>charged:</b></td> <td style="text-align: right;">\$</td> </tr> </tbody> </table> |              | \$ 920.00 |                               | \$     | CLAIMS | NUMBER FILED | NUMBER EXTRA | RATE |  |  | Total claims | 20-20 = |  | x | \$ | 0.00 | Independent claims | 1-3 = |  | x | \$ | 0.00 | MULTIPLE DEPENDENT CLAIM(s) (if applicable) |  |  |  | + | \$ | <b>TOTAL OF ABOVE CALCULATIONS =</b> |  |  |  | \$ | 920.00 | <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½. |  |  |  | \$ |  | <b>SUBTOTAL =</b> |  |  |  | \$ | 920.00 | Processing fee of <b>\$130.00</b> for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492 (f)). |  |  |  | \$ |  | <b>TOTAL NATIONAL FEE =</b> |  |  |  | \$ | 920.00 | Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). <b>\$40.00</b> per property |  |  |  | + | \$ | <b>TOTAL FEES ENCLOSED =</b> |  |  |  | \$ | 920.00 |  |  |  |  | <b>Amount to be refunded:</b> | \$ | <b>charged:</b> | \$ |
|---|---|--------------|-----------|-------------------------------|--------|--------|--------------|--------------|------|--|--|--------------|---------|--|---|----|------|--------------------|-------|--|---|----|------|---|--|--|--|---|----|--------------------------------------|--|--|--|----|--------|--|--|--|--|----|--|-------------------|--|--|--|----|--------|---|--|--|--|----|--|-----------------------------|--|--|--|----|--------|--|--|--|--|---|----|------------------------------|--|--|--|----|--------|--|--|--|--|-------------------------------|----|-----------------|----|
|   | \$ 920.00   |              |           |                               |        |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
|   | \$  |              |           |                               |        |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| CLAIMS  | NUMBER FILED  | NUMBER EXTRA | RATE      |                               |        |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| Total claims  | 20-20 =   |              | x         | \$                            | 0.00   |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| Independent claims  | 1-3 =   |              | x         | \$                            | 0.00   |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| MULTIPLE DEPENDENT CLAIM(s) (if applicable)   |   |              |           | +                             | \$     |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| <b>TOTAL OF ABOVE CALCULATIONS =</b>  |   |              |           | \$                            | 920.00 |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. The fees indicated above are reduced by ½.  |   |              |           | \$                            |        |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| <b>SUBTOTAL =</b>   |   |              |           | \$                            | 920.00 |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| Processing fee of <b>\$130.00</b> for furnishing the English translation later than 30 months from the earliest claimed priority date (37 CFR 1.492 (f)).   |   |              |           | \$                            |        |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| <b>TOTAL NATIONAL FEE =</b>   |   |              |           | \$                            | 920.00 |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| Fee for recording the enclosed assignment (37 CFR 1.21 (h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). <b>\$40.00</b> per property  |   |              |           | +                             | \$     |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
| <b>TOTAL FEES ENCLOSED =</b>  |   |              |           | \$                            | 920.00 |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
|   |   |              |           | <b>Amount to be refunded:</b> | \$     |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |
|   |   |              |           | <b>charged:</b>               | \$     |        |              |              |      |  |  |              |         |  |   |    |      |                    |       |  |   |    |      |   |  |  |  |   |    |                                      |  |  |  |    |        |  |  |  |  |    |  |                   |  |  |  |    |        |   |  |  |  |    |  |                             |  |  |  |    |        |  |  |  |  |   |    |                              |  |  |  |    |        |  |  |  |  |                               |    |                 |    |

|  |   |
|--|---|
| a. <input checked="" type="checkbox"/> A check in the amount of \$ <u>920.00</u> to cover the above fees is enclosed.<br>b. <input type="checkbox"/> Please charge my Deposit Account No. _____ in the amount of \$ _____ to cover the above fees. A duplicate copy of this sheet is enclosed.<br>c. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>03-2775</u> . A duplicate copy of this sheet is enclosed.<br>d. <input type="checkbox"/> Fees are to be charged to a credit card. <b>WARNING:</b> Information on this form may become public. <b>Credit card information should not be included on this form.</b> Provide credit card information and authorization on PTO-2038. | NOTE: Where an appropriate time limit under 37 CFR 1.495 has not been met, a petition to revive (37 CFR 1.137 (a) or (b)) must be filed and granted to restore the application to pending status.<br>SEND ALL CORRESPONDENCE TO:<br><div style="text-align: right; margin-top: 20px;"> <br/>           SIGNATURE:<br/>           Ashley I. Pezzner<br/>           NAME         </div> |
|--|---|

|                                  |                               |
|----------------------------------|-------------------------------|
| CUSTOMER NUMBER: 23416<br>353700 | 35,646<br>REGISTRATION NUMBER |
|----------------------------------|-------------------------------|

10/506541

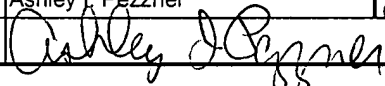
DM15 Rec'd PCT/PTO 02 SEP 2004

PTO/SB/17 (10-03)

Approved for use through 7/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

| FEE TRANSMITTAL<br>for FY 2004  |          |  |          | Complete if Known   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
|---|----------|--|----------|---|----------|------------------------------------|--|-----------------|----------|--------------|----------|-----------------|----------|----------|----------|----------|----------|--------------------|-----|------|-----|-------------------------------------|-----|-------------------|----|------|-----|---|-----|------------------|-----|------|-----|---------------------------|-----|--------------------|-------|------|-------|--|----|------------------------|------|---------------------|------|--|--|------|--------|---|--------|---|--|--------------|-----|--------------|----|--|----------|----------|----------|----------|----------|---|----|------|-----|------------------------|-----|--|----|------|-------|-----------------------------------|-----|---|-----|------|-------|---------------------------------------|-------|--|----|------|-----|--|-----|------------------|----|------|-----|--|-----|--|--|------|-----|------|------|--------------------------|--|------|-------|------|-------|---|--|------|-----|------|----|----------------------------------|--|------|-------|------|-----|------------------------------------|--|------|-------|------|-----|--------------------------------|--|------|-----|------|-----|------------------|--|------|-----|------|-----|-----------------|--|------|-----|------|-----|-------------------------------|--|------|----|------|----|-------------------------------------|--|------|-----|------|-----|---|--|------|----|------|----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|--|--|------|-----|------|-----|---|--|------|-----|------|-----|---|--|--|--|--|--|--|--------|
| Effective 10/01/2003. Patent fees are subject to annual revision.   |          |  |          | Application Number  |          | Not Yet Assigned                   |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27  |          |  |          | Filing Date   |          | Concurrently Herewith              |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
|   |          |  |          | First Named Inventor  |          | Nicolai Papke                      |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
|   |          |  |          | Examiner Name   |          | Not Yet Assigned                   |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
|   |          |  |          | Art Unit  |          | N/A                                |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| <b>TOTAL AMOUNT OF PAYMENT</b>  |          | (\$)                                     |          | 920.00  |          | Attorney Docket No. 05587-00369-US |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| METHOD OF PAYMENT (check all that apply)  |          |  |          | FEE CALCULATION (continued)   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None<br><input type="checkbox"/> Deposit Account:<br>Deposit Account Number: 03-2775<br>Deposit Account Name: Connolly Bove Lodge & Hutz LLP<br>The Director is authorized to: (check all that apply)<br><input type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments<br><input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)<br><input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.   |          |  |          | <b>3. ADDITIONAL FEES</b><br><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td><td>Surcharge - late filing fee or oath</td><td></td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td><td>Surcharge - late provisional filing fee or cover sheet.</td><td></td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td><td>Non-English specification</td><td></td></tr> <tr><td>1812</td><td>2,520</td><td>1812</td><td>2,520</td><td>For filing a request for <i>ex parte</i> reexamination</td><td></td></tr> <tr><td>1804</td><td>920*</td><td>1804</td><td>920*</td><td>Requesting publication of SIR prior to Examiner action</td><td></td></tr> <tr><td>1805</td><td>1,840*</td><td>1805</td><td>1,840*</td><td>Requesting publication of SIR after Examiner action</td><td></td></tr> <tr><td>1251</td><td>110</td><td>2251</td><td>55</td><td>Extension for reply within first month</td><td></td></tr> <tr><td>1252</td><td>420</td><td>2252</td><td>210</td><td>Extension for reply within second month</td><td></td></tr> <tr><td>1253</td><td>950</td><td>2253</td><td>475</td><td>Extension for reply within third month</td><td></td></tr> <tr><td>1254</td><td>1,480</td><td>2254</td><td>740</td><td>Extension for reply within fourth month</td><td></td></tr> <tr><td>1255</td><td>2,010</td><td>2255</td><td>1,005</td><td>Extension for reply within fifth month</td><td></td></tr> <tr><td>1401</td><td>330</td><td>2401</td><td>165</td><td>Notice of Appeal</td><td></td></tr> <tr><td>1402</td><td>330</td><td>2402</td><td>165</td><td>Filing a brief in support of an appeal</td><td></td></tr> <tr><td>1403</td><td>290</td><td>2403</td><td>145</td><td>Request for oral hearing</td><td></td></tr> <tr><td>1451</td><td>1,510</td><td>1451</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td></td></tr> <tr><td>1452</td><td>110</td><td>2452</td><td>55</td><td>Petition to revive - unavoidable</td><td></td></tr> <tr><td>1453</td><td>1,330</td><td>2453</td><td>665</td><td>Petition to revive - unintentional</td><td></td></tr> <tr><td>1501</td><td>1,330</td><td>2501</td><td>665</td><td>Utility issue fee (or reissue)</td><td></td></tr> <tr><td>1502</td><td>480</td><td>2502</td><td>240</td><td>Design issue fee</td><td></td></tr> <tr><td>1503</td><td>640</td><td>2503</td><td>320</td><td>Plant issue fee</td><td></td></tr> <tr><td>1460</td><td>130</td><td>1460</td><td>130</td><td>Petitions to the Commissioner</td><td></td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td><td>Processing fee under 37 CFR 1.17(q)</td><td></td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td><td>Submission of Information Disclosure Stmt</td><td></td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td></td></tr> <tr><td>1809</td><td>770</td><td>2809</td><td>385</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td></td></tr> <tr><td>1810</td><td>770</td><td>2810</td><td>385</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td></td></tr> <tr><td>1801</td><td>770</td><td>2801</td><td>385</td><td>Request for Continued Examination (RCE)</td><td></td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td><td>Request for expedited examination of a design application</td><td></td></tr> <tr><td colspan="4">Other fee (specify) 1613 PCT; For filing where search report done by EPO/JPO</td><td></td><td>920.00</td></tr> </tbody> </table> |          |                                    |  | Large Entity    |          | Small Entity |          | Fee Description | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1051               | 130 | 2051 | 65  | Surcharge - late filing fee or oath |     | 1052              | 50 | 2052 | 25  | Surcharge - late provisional filing fee or cover sheet. |     | 1053             | 130 | 1053 | 130 | Non-English specification |     | 1812               | 2,520 | 1812 | 2,520 | For filing a request for <i>ex parte</i> reexamination |    | 1804                   | 920* | 1804                | 920* | Requesting publication of SIR prior to Examiner action |  | 1805 | 1,840* | 1805  | 1,840* | Requesting publication of SIR after Examiner action |  | 1251         | 110 | 2251         | 55 | Extension for reply within first month |          | 1252     | 420      | 2252     | 210      | Extension for reply within second month |    | 1253 | 950 | 2253                   | 475 | Extension for reply within third month |    | 1254 | 1,480 | 2254                              | 740 | Extension for reply within fourth month |     | 1255 | 2,010 | 2255                                  | 1,005 | Extension for reply within fifth month |    | 1401 | 330 | 2401   | 165 | Notice of Appeal |    | 1402 | 330 | 2402   | 165 | Filing a brief in support of an appeal |  | 1403 | 290 | 2403 | 145  | Request for oral hearing |  | 1451 | 1,510 | 1451 | 1,510 | Petition to institute a public use proceeding |  | 1452 | 110 | 2452 | 55 | Petition to revive - unavoidable |  | 1453 | 1,330 | 2453 | 665 | Petition to revive - unintentional |  | 1501 | 1,330 | 2501 | 665 | Utility issue fee (or reissue) |  | 1502 | 480 | 2502 | 240 | Design issue fee |  | 1503 | 640 | 2503 | 320 | Plant issue fee |  | 1460 | 130 | 1460 | 130 | Petitions to the Commissioner |  | 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) |  | 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt |  | 8021 | 40 | 8021 | 40 | Recording each patent assignment per property (times number of properties) |  | 1809 | 770 | 2809 | 385 | Filing a submission after final rejection (37 CFR 1.129(a)) |  | 1810 | 770 | 2810 | 385 | For each additional invention to be examined (37 CFR 1.129(b)) |  | 1801 | 770 | 2801 | 385 | Request for Continued Examination (RCE) |  | 1802 | 900 | 1802 | 900 | Request for expedited examination of a design application |  | Other fee (specify) 1613 PCT; For filing where search report done by EPO/JPO |  |  |  |  | 920.00 |
| Large Entity  |          | Small Entity                             |          | Fee Description   | Fee Paid |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| Fee Code  | Fee (\$) | Fee Code                                 | Fee (\$) |   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1051  | 130      | 2051                                     | 65       | Surcharge - late filing fee or oath   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1052  | 50       | 2052                                     | 25       | Surcharge - late provisional filing fee or cover sheet.   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1053  | 130      | 1053                                     | 130      | Non-English specification   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1812  | 2,520    | 1812                                     | 2,520    | For filing a request for <i>ex parte</i> reexamination  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1804  | 920*     | 1804                                     | 920*     | Requesting publication of SIR prior to Examiner action  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1805  | 1,840*   | 1805                                     | 1,840*   | Requesting publication of SIR after Examiner action   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1251  | 110      | 2251                                     | 55       | Extension for reply within first month  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1252  | 420      | 2252                                     | 210      | Extension for reply within second month   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1253  | 950      | 2253                                     | 475      | Extension for reply within third month  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1254  | 1,480    | 2254                                     | 740      | Extension for reply within fourth month   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1255  | 2,010    | 2255                                     | 1,005    | Extension for reply within fifth month  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1401  | 330      | 2401                                     | 165      | Notice of Appeal  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1402  | 330      | 2402                                     | 165      | Filing a brief in support of an appeal  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1403  | 290      | 2403                                     | 145      | Request for oral hearing  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1451  | 1,510    | 1451                                     | 1,510    | Petition to institute a public use proceeding   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1452  | 110      | 2452                                     | 55       | Petition to revive - unavoidable  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1453  | 1,330    | 2453                                     | 665      | Petition to revive - unintentional  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1501  | 1,330    | 2501                                     | 665      | Utility issue fee (or reissue)  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1502  | 480      | 2502                                     | 240      | Design issue fee  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1503  | 640      | 2503                                     | 320      | Plant issue fee   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1460  | 130      | 1460                                     | 130      | Petitions to the Commissioner   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1807  | 50       | 1807                                     | 50       | Processing fee under 37 CFR 1.17(q)   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1806  | 180      | 1806                                     | 180      | Submission of Information Disclosure Stmt   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 8021  | 40       | 8021                                     | 40       | Recording each patent assignment per property (times number of properties)  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1809  | 770      | 2809                                     | 385      | Filing a submission after final rejection (37 CFR 1.129(a))   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1810  | 770      | 2810                                     | 385      | For each additional invention to be examined (37 CFR 1.129(b))  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1801  | 770      | 2801                                     | 385      | Request for Continued Examination (RCE)   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1802  | 900      | 1802                                     | 900      | Request for expedited examination of a design application   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| Other fee (specify) 1613 PCT; For filing where search report done by EPO/JPO  |          |  |          |   | 920.00   |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| FEE CALCULATION   |          |  |          | *Reduced by Basic Filing Fee Paid   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| <b>1. BASIC FILING FEE</b><br><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1001</td><td>770</td><td>2001</td><td>385</td><td>Utility filing fee</td><td></td></tr> <tr><td>1002</td><td>340</td><td>2002</td><td>170</td><td>Design filing fee</td><td></td></tr> <tr><td>1003</td><td>530</td><td>2003</td><td>265</td><td>Plant filing fee</td><td></td></tr> <tr><td>1004</td><td>770</td><td>2004</td><td>385</td><td>Reissue filing fee</td><td></td></tr> <tr><td>1005</td><td>160</td><td>2005</td><td>80</td><td>Provisional filing fee</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (1)</b></td> <td>(\$)</td> <td>0.00</td> </tr> </tbody> </table> |          |  |          | Large Entity  |          | Small Entity                       |  | Fee Description | Fee Paid | Fee Code     | Fee (\$) | Fee Code        | Fee (\$) | 1001     | 770      | 2001     | 385      | Utility filing fee |     | 1002 | 340 | 2002                                | 170 | Design filing fee |    | 1003 | 530 | 2003  | 265 | Plant filing fee |     | 1004 | 770 | 2004                      | 385 | Reissue filing fee |       | 1005 | 160   | 2005   | 80 | Provisional filing fee |      | <b>SUBTOTAL (1)</b> |      |  |  | (\$) | 0.00   | <b>2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE</b><br><br><table border="1" style="width: 100%; border-collapse: collapse; font-size: 0.8em;"> <thead> <tr> <th colspan="2">Large Entity</th> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr><td>1202</td><td>18</td><td>2202</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>1201</td><td>86</td><td>2201</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>1203</td><td>290</td><td>2203</td><td>145</td><td>Multiple dependent claim, if not paid</td><td></td></tr> <tr><td>1204</td><td>86</td><td>2204</td><td>43</td><td>** Reissue independent claims over original patent</td><td></td></tr> <tr><td>1205</td><td>18</td><td>2205</td><td>9</td><td>** Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr> <td colspan="4" style="text-align: right;"><b>SUBTOTAL (2)</b></td> <td>(\$)</td> <td>0.00</td> </tr> </tbody> </table> |        |   |  | Large Entity |     | Small Entity |    | Fee Description                        | Fee Paid | Fee Code | Fee (\$) | Fee Code | Fee (\$) | 1202                                    | 18 | 2202 | 9   | Claims in excess of 20 |     | 1201                                   | 86 | 2201 | 43    | Independent claims in excess of 3 |     | 1203                                    | 290 | 2203 | 145   | Multiple dependent claim, if not paid |       | 1204                                   | 86 | 2204 | 43  | ** Reissue independent claims over original patent |     | 1205             | 18 | 2205 | 9   | ** Reissue claims in excess of 20 and over original patent |     | <b>SUBTOTAL (2)</b>                    |  |      |     | (\$) | 0.00 |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| Large Entity  |          | Small Entity                             |          | Fee Description   | Fee Paid |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| Fee Code  | Fee (\$) | Fee Code                                 | Fee (\$) |   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1001  | 770      | 2001                                     | 385      | Utility filing fee  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1002  | 340      | 2002                                     | 170      | Design filing fee   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1003  | 530      | 2003                                     | 265      | Plant filing fee  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1004  | 770      | 2004                                     | 385      | Reissue filing fee  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1005  | 160      | 2005                                     | 80       | Provisional filing fee  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| <b>SUBTOTAL (1)</b>   |          |  |          | (\$)  | 0.00     |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| Large Entity  |          | Small Entity                             |          | Fee Description   | Fee Paid |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| Fee Code  | Fee (\$) | Fee Code                                 | Fee (\$) |   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1202  | 18       | 2202                                     | 9        | Claims in excess of 20  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1201  | 86       | 2201                                     | 43       | Independent claims in excess of 3   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1203  | 290      | 2203                                     | 145      | Multiple dependent claim, if not paid   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1204  | 86       | 2204                                     | 43       | ** Reissue independent claims over original patent  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| 1205  | 18       | 2205                                     | 9        | ** Reissue claims in excess of 20 and over original patent  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| <b>SUBTOTAL (2)</b>   |          |  |          | (\$)  | 0.00     |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| **or number previously paid, if greater; For Reissues, see above  |          |  |          | <b>SUBTOTAL (3)</b> (\$) 920.00   |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| SUBMITTED BY  |          |  |          | (Complete (if applicable))  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| Name (Print/Type) Ashley J. Pezzner   |          | Registration No. (Attorney/Agent) 35,646 |          | Telephone (302) 658-9141  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |
| Signature    |          |  |          | Date September 2, 2004  |          |                                    |  |                 |          |              |          |                 |          |          |          |          |          |                    |     |      |     |                                     |     |                   |    |      |     |   |     |                  |     |      |     |                           |     |                    |       |      |       |  |    |                        |      |                     |      |  |  |      |        |   |        |   |  |              |     |              |    |  |          |          |          |          |          |   |    |      |     |                        |     |  |    |      |       |                                   |     |   |     |      |       |                                       |       |  |    |      |     |  |     |                  |    |      |     |  |     |  |  |      |     |      |      |                          |  |      |       |      |       |   |  |      |     |      |    |                                  |  |      |       |      |     |                                    |  |      |       |      |     |                                |  |      |     |      |     |                  |  |      |     |      |     |                 |  |      |     |      |     |                               |  |      |    |      |    |                                     |  |      |     |      |     |   |  |      |    |      |    |  |  |      |     |      |     |   |  |      |     |      |     |  |  |      |     |      |     |   |  |      |     |      |     |   |  |  |  |  |  |  |        |

353702

Application No. (if known):

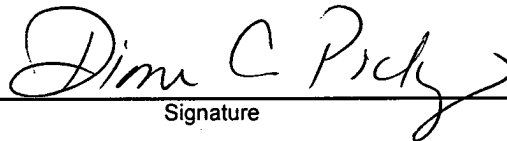
Attorney Docket No.: 05587-00369-US

## Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 473530773 in an envelope addressed to:

MS PCT  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

on September 2, 2004  
Date



Signature

- Diane C. Pickering -

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Application Data Sheet  
Transmittal Letter PTO Form 1390 (2) sheets  
Fee Transmittal Sheet  
Form PCT/IB/308 (1) sheet  
Form PCT/RO/101 (4) pages  
International Application w/Search Report  
English Translation of International Appln.  
Preliminary Amendment  
IDS/PTO Form SB-08 w/References  
Check for \$920.00  
Return Postcard

353698